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APPLICANTS

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** CONTINUING DATA *****

Clear (none)

** FOREIGN APPLICATIONS *****

Clear (none)

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 10/24/2003

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY KY	SHEETS DRAWING 3	TOTAL CLAIMS 35	INDEPENDENT CLAIMS 6
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after <i>Allowance</i>				

Verified and Acknowledged

Douglas Murray *Clear*
 Examiner's Signature Initials

ADDRESS

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TITLE

Integrated media input tray including electronics

FILING FEE RECEIVED 1272	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other <input type="checkbox"/> Credit
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